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## EXTENDED TO NOVEMBER 15, 2017

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

54	For	the 2016 calendar year, or tax year beginning	and ending		
44. 2∕8	Check applic	of C Name of organization		D Employer identifi	ication number
آ <	Ad	THESE ELIJAH LIST MINISTRIES, INC.			
֓֞֞֝֞֓֞֓֓֓֓֓֓֟֝֟֓֓֓֟֟֓֓֓֟֓֓֟֓֓֟֟֓֓֓֟֓֓֟֓֓֟֓֓֟֓֟֓֓֟֓	Na			16-1	690199
₹ [	lnit reti	al	Room/sur		
] ב	Fin	528 ELLSWORTH ST SW_			967-3665
발 본 _	terr ate	City or town, state or province, country, and ZIP or foreign postal code	•	G Gross receipts \$	385,747.
	!retu			H(a) Is this a group re	
5 L	tion	ding 1		for subordinates	· — —
<b>1</b> _		1528 ELLSWORTH ST. SW., ALBANY, OR 9	7321	H(b) Are all subordinates ii	
1			a)(1) or 52	<del></del>	list. (see instructions)
		site: WWW.ELIJAHLIST.COM of organization: X Corporation Trust Association Other		H(c) Group exemptio	
	Part 1	<del>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </del>	<u>  L Yea</u>	ir of formation: 2003 N	State of legal domicile: OR
٠	14	Briefly describe the organization's mission or most significant activities: A	PET.TCTO	IIS ORGANIZAT	TON
Governance	5 ,	PERFORMING CHARITABLE ACTS & TEACHINGS			
Š	2	Check this box  fthe organization discontinued its operations or			
Š	3	Number of voting members of the governing body (Part VI, line 1a)	KEU	FIVED 13	4
		Number of independent voting members of the governing body (Part VI, line	1b)	Q 4	4
Activities 8.	5   5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	21 1111	2 4 2017 5	5
3	6	Total number of volunteers (estimate if necessary)	il .	S 6	0
Ť	{   7;	a Total unrelated business revenue from Part VIII, column (C), line 12	DODE		0.
		Net unrelated business taxable income from Form 990-T, line 34	UGU	-JN	0.
			<u> </u>	Prior Year	Current Year
9	8	Contributions and grants (Part VIII, line 1h)	· · · }_	306,542.	349,062.
Revenue	9	Program service revenue (Part VIII, line 2g)	· · ·	15,464.	36,508.
B	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	·  -	0.	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u></u>	2,113. 324,119.	177.
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1	2)	324,119.	385,747. 4,100.
	14	Grants and similar amounts paid (Part IX, column (A), lines 1-3)  Benefits paid to or for members (Part IX, column (A), line 4)		0.	<del>4,100.</del> 0.
"		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-	10)	144,402.	129,832.
Expenses	162	Professional fundraising fees (Part IX, column (A), line 11e)	10,	0.	0.
De.	L		,848.		
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		155,691.	294,176.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		300,093.	428,108.
	19	Revenue less expenses. Subtract line 18 from line 12		24,026.	<42,361.>
Net Assets or	3		В	eginning of Current Year	End of Year
Set	20	Total assets (Part X, line 16)		66,614.	73,392.
tie A	21	Total liabilities (Part X, line 26)	_	29,461.	<u>78,600.</u>
		Net assets or fund balances. Subtract line 21 from line 20	<u></u>	37,153.	<u>&lt;5,208.</u> >
	art li	<del></del>	1.1		
		alties of perjury, I declare that I have examined this return, including accompanying sche			Knowledge and belief, it is
uue	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of	or which prepare	r nas any knowledge.	
Sig		Signature of officer		Date	1 11
He		STEVE SHULTZ, PRESIDENT	_	7-1	
110		Type or print name and title	<del></del>	<del></del>	
		Print/Type preparer's name Preparer's name	7	Date Check	PTIN
Pai	d	RICHARD D. PERDUE	_	6-28-17 if self-employed	P00129286
Pre	parer	Firm's name KOONTZ, PERDUE, BLASQUEZ & CO	P.C.	Firm's EIN	93-0612582
	Only	Firm's address 920 ELM STREET SW			
		ALBANY, OR 97321-2037		Phone no. (54	11)926-5543
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
6320	001 11-	11-16 LHA For Paperwork Reduction Act Notice, see the separate instru	ections.	<del></del>	Form 990 (2016)

	Total program service expenses p	Form <b>99</b>	0 (2016)						
4e	(Expenses \$ including grants of \$ ) (Revenue \$  Total program service expenses ► 86,879.		<del></del>						
4d	Other program services (Describe in Schedule O.)								
4c	(Code:) (Expenses \$	evenue \$							
TU	(Code	evenue ⊅	/						
4b	(Code) (Expenses \$ including grants of \$) (R								
	LEADING CHURCH AND PARACHURCH REPRESENTATIVES.								
	PRODUCE AND PUBLISH THROUGH DIFFERENT MEDIA DEVICES OF		HT						
	USE OF CONFERENCES, SEMINARS, LITERATURE, MEDIA, RADIO		. 1117						
4a	(Code) (Expenses \$ 86,879. including grants of \$ 4,100.) (FTRAIN AND PROMOTE THE TEACHING AND PREACHING OF THE GRAND PREACHING PREACHING OF THE GRAND PREACHING PREACHI		508.)						
	revenue, if any, for each program service reported.								
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, an									
4	If "Yes," describe these changes on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program services	s, as measured by expenses.							
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service if "Yes," describe these sharpes on Schodule O	es? Yes	LX No						
	If "Yes," describe these new services on Schedule O.								
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	e Yes	X No						
	Did the organization undertake any symptoant program convices during the voca which were not listed as the								
	RELATING TO THE BIBLE.	TRUCITION							
1	Briefly describe the organization's mission.  A RELIGIOUS ORGANIZATION PERFORMING CHARITABLE ACTS &	TEACHTNGS							
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>							
	art III Statement of Program Service Accomplishments	10 1030133	age z						
For	m 990 (2016) ELIJAH LIST MINISTRIES, INC.	16-1690199	Page 2						

Part IV Checklist of Required Schedules

complete Schedule G, Part III

	- Total Control of Con		T.	
20a	Did the example on an armore begainst facilities? If "Vee " complete Schoolule II	202	Yes	No X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b	<del> </del>	+≏
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200	<del> </del>	+
21		21	}	x
22	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	41	<del>                                     </del>	<b>┼</b> ^
~~	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	000	}	X
~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22_		+≏
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1	Į	1
	Schedule J	23	<del> </del>	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1	1	1
	Schedule K. If "No", go to line 25a	24a		X
ь		24b	<del> </del>	┼
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		l	
A	any tax-exempt bonds?	24c 24d	<del> </del>	+
		240	<b></b> -	+
<b>2</b> 3a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-	l	X
<b>b</b>	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		┼≏
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	-	İ	}
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	OF L		~
oe.	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		1	1
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	1 ~		X
27	Complete Schedule L, Part II	26		+-
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1 1	1	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	07	ı	x
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		┼≏
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	1 1		
_	Instructions for applicable filing thresholds, conditions, and exceptions).	00-		
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		1	
~~	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	1 1		₹.
	contributions? If "Yes," complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations?	1		v
	If "Yes," complete Schedule N, Part I	31		X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1 00 1	1	- V
	Schedule N, Part II	32	-	X
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1 1		77
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	1	Í	
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1 1	j	ĺ
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		ĺ	
	f "Yes," complete Schedule R, Part V, line 2	36		X
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		}	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> X</u>
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	1 1		
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form 9	<del>J</del> 90 (	2016)

ta Enter the number reported in Box 3 of Form 1096. Enter -0-if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0-if not applicable  Defend the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  1 to 1 the sum of lines 1a and 2a is greater than 250, you may be required federal employment tax returns?  Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Dd the organization have unrelated business gross income of \$1,000 or more during the year?  3a If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  3b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  3c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts)?  4a Xi If "Yes," the site of the foreign country; be See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction?  5b If "Yes," do the organization file Form 8886-T?  5c If "Yes," do the organization have an unable of the properties of the organization solicit any contributions that twere not tax deductible as charistable contributions?  5c If "Yes," do the organization include with every solicitation an express statement that such contributions or grifs were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 If "Yes," did the organization on notify the deductible as charistable contribu	P	Check if Schedule O contains a response or note to any line in this Part V			_
b Eiter the number of Forms W-2G included in line 1a. Enter 0-If not applicable.  Del the organization compley with backey witholing rules for reportable payments to vendors and reportable gaming (gambling) wrenings to prize winners?  Eiter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, feel for the calendar year ending with or within the year covered by this return.  Possible of the calendar year ending with or within the year covered by this return.  It is least one is reported on line 2a, did the organization lise all required federal employment tax returns?  Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-five (see instructions).  B If Yes, 'inst a filed a Form 990-7 for the year If 'No, 1' folle 93, provide an explanation in Schedule O.  B If Yes, 'and a filed a Form 990-7 for the year If 'No, 1' folle 93, provide an explanation in Schedule O.  B If Yes, 'enter the name of the foreign country; 'See a bank account, securities account; or orther financial accounts' FBAR).  See instructions for filing requirements for FincEIN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for lining requirements for FincEIN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  Sa Was the organization a party to a prohibited tax shelter transaction at any time duming the tax year?  Did any taxable party norty the organization that the was or is a party to a prohibition or year to a prohibited tax shelter transaction?  So Did any taxable party norty the organization that it was or is a party to a prohibition or year to the organization shell will be organization from the organization file form 8899 as the organization shell of the organization file form 8890 and services provided to the payor to the organization shell of the organization in excess of 5f5 made party as a contribution and party for goods and services provided to the payor 1/2 bit to reginazation receive a payment in excess of 5f5 made party as a			_ <del></del> -	Yes	No
c Did the organization comply with backup withholding jules for reportable payments to vendors and reportable gaming (gambing) with maps to prace with even within the year covered by this return.  2a Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, filed for the calendar year anding with or within the year covered by this return.  3b If it is used one is reported on line 2a, did the organization file all required federal employment tax returns?  3c Note, if the sum of lines is and 2a is greater than 250, you may be required to e-file (see instructions)  3c Did the organization have unrelated business gross income of \$1 Lin00 or more during the year?  3c At any time duming the calendary year, did the organization have an interest in, or a segniture or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts?  4c At any time the name of the torsign country.  5c Was the organization or the foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5a Was the organization account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5a Was the organization account of Fine CEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5b Was the organization have in the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "**'s 1 line is a crist, and the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "** 10 line is a rost, but the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "** 10 line is a rost, but the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "** 10 line is a rost, but the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "** 10 line is a rost, but the organization that it was or is a party to a prohibite	18	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	)		
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See in His vest, the least one and part to a special that it was or as partly to grow the distributions for filing requirements for the organization have annual grows received the organization have annual grows received the organization have annual grows and the very selection of the organization have annual grows and the very selection of the organization have annual grows and the very selection of the organization have annual grows and the very selection of the organization have annual grows received the organization have annual grows and the very selection of the organization of the organization have annual grows and the very selection of the organization of the organization have annual grows and the very selection of the organization organization organization of the organization organi	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b (	)	1	
tale Eiter the number of employees reported on Form W3. Transmittal of Wape and Tax Statements.    Tax India Comparison   Page 2	c		]		j
iffed for the calendary year ending with or within the year covered by this return  bit of at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross in some of \$1,000 or more during the year?  5b if "See," has the filed a Form 990-1 for this year? If "No," to line 3b, provide an explanation in Schedule 0  5a Use 1 if "See," has the did a Form 990-1 for this year? If "No," to line 3b, provide an explanation in Schedule 0  5a Use 1 if "See," has the did a Form 990-1 for this year? If "No," to line 3b, provide an explanation in Schedule 0  5b If "Yes," enter the name of the foreign country. See a structions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Use the organization have annual gross recepts that are normally greater than \$100,000, and did the organization soleit any contributions that were not tax deductible?  6b If "Yes," to line 5a or 5b, did the organization the Form 88861?  7 Organizations that may receive deductible contributions under section 170(c).  8b If "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8c Did the organization sell, exchange, or otherwise dispose of tamptile personal property for which it was required to 6 Form 88820 for the organization neally segment in excess of 5f made partly as a contribution of the organization freeder approach at the organization file a Form 1088 C?  7c Did the organization receive a paymental received or indirectly, to pay premiums on a personal benefit contract?  7c Did the organization received a payment in excess of		(gambling) winnings to prize winners?	1c		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Dd the organization have unrelated business gross income of \$1,000 or more during the year?  3b If "Yes," has it filed a form 990-1 for the year? If "No," to line 3b, provide an explanation in Schedule O  3d At any time during the calendary year, did he organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  4d At any time the financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5d If "Yes," the organization is party to a prohibited tax shelter transaction, as a party to a prohibited tax shelter transaction?  5d Was the organization a party to a prohibited tax shelter transaction?  5d Did any texable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5d Did with the spanization include with every solicitation an express statement that such contributions or grifts were not tax deductible?  6d Did the organization notify the donor of the value of the goods or services provided?  7d Did the organization notify the donor of the value of the goods or services provided?  7d Did the organization neceive a psyment in excess of 35° made party as a combibility and party for goods and services provided to the payor?  7d If "Yes," did the organization notify the donor of the value of the goods or services provided?  7d Did the organization neceived a contribution of qualified intellectual property, did the organization and party organization and party organizations and party organizations and party organizations and party organizations and party organization and party organization in the organization in services during the year.  9 Did the organization and party and	<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Note. If the sum of lens 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 If Yes,* has it filed a Form 990-T for this year? If Yeo,* to line 30, provide an explanation in Schedule O 3 Did If Yes,* has it filed a Form 990-T for this year? If Yeo,* to line 30, provide an explanation in Schedule O 3 Did Yes,* has it filed a Form 990-T for this year? If Yeo,* to line the calendar year, did the organization have an interest in, or a signature or other authonly over, a financial account in a foreign country. ► 5 Per enstructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shelt are not tax deductibles of the party of the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shelt may receive deductible contributions under section 170(c). 6 Did the organization receive a payment in excess of \$5 made party as contribution and party for goods and services provided to the payor? 7 Dragnizations that may receive deductible contributions under section 170(c). 9 Did the organization receive a payment in excess of \$5 made party as contribution of your section \$10,000 or \$10,000		filed for the calendar year ending with or within the year covered by this return 2a 5	<u>.</u> ]		
the both eorganization have unrelated business gross income of \$1,000 or more during the year?  bif Yes, *has it filed a Form 990-Ti for this year? if *No,* to fine 36, provide an explanation in Schedule O  da At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; in a foreign country; leads as a bank account, securities account, or other financial account(?)  See instructions for fining requirements for FiniCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).  See instructions for fining requirements for FiniCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).  See instructions for fining requirements for FiniCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).  See instructions for fining requirements for FiniCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).  See instructions for fining requirements for FiniCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).  See instructions for fining requirements for FiniCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).  See instructions for fining requirements for FiniCEN Form 114, Report of Foreign Bank and Fining Form 8886-17.  If Yes, *to the ine 5a or 5b, did the organization fine Form 8886-17.  Organizations that may receive deductible as charitable contributions?  If Yes, *did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  By If Yes, *did the organization serve a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  The Yes, *did the organization serve any funds, directly to pay premium and partly for goods and services provided to the payor of the Yes, *included or payment in excess of \$75 made partly as a contribution of a payment in a payment in the year payment in	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
b if "Yes," has filled a Form 990-T for this year? if "No," to line 3b, provide an explanation in Schedule 0 a 4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a floreign country (such as a bank account, securities account, or other financial accountly over, a financial account in a floreign country; which is a such as a bank account, securities account, or other financial accountly over, a financial account in a floreign country; which is a such as a suc		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		,	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b if "Yes," enter the name of the foreign country. ▶  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  8 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 B Was the organization that it was or is a party to a prohibited tax shelter transaction?  5 C if "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 C if "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 C if "Yes," to did the organization include with every solicitation and express statement that such contributions or orgits were not tax deductible?  6 Dost the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive a payment in excess of 375 made partly as a contribution and partly for goods and services provided to the payor?  7 Did the organization receive a payment in excess of 375 made partly as a contribution of prometry of the goods or services provided?  7 Did the organization received a payment in excess of 375 made partly as a contribution of prometry of the goods or services provided?  7 Did the organization received a payment in excess of 375 made partly as a contribution of prometry of the goods or services provided?  7 Did the service of the service of the service of the goods or services provided?  7 Did the organization received a contribution of cut in the good of the good of the service of the good of the g	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	_3a		X
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e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  ff If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  fif the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9a  b Gross receipts, included on Form 990, Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11a  b Gross income from members or shareholders  11a  12a  13a  Section 4947(a)(1) non-exempt charitable trusts. Is the organization fliing Form 990 in lieu of Form 1041?  14a  15b  17c  17d  77d  77d  77b  77b  77c  77d  77c  77d  77d			/c		
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8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 b Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b					
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b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13a Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  4a Did the organization receive any payments for indoor tanning services during the tax year?  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	а		9a	ľ	
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Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11b  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	а	Initiation fees and capital contributions included on Part VIII, line 12		- (	
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amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	а	Gross income from members or shareholders		į	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b	Gross income from other sources (Do not net amounts due or paid to other sources against		Í	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		amounts due or received from them.)	1		
Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?  13a  13b  13c  13c  14a  X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  14b	2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  13a  13a  13a  13a  13b  13b  13b  13c  14a  X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  14b	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	. 1		
Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  4a Did the organization receive any payments for indoor tanning services during the tax year?  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  14b					
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			13a		
organization is licensed to issue qualified health plans		<u>-</u>		j	
c Enter the amount of reserves on hand			}	1	
4a Did the organization receive any payments for indoor tanning services during the tax year?  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  14b				1	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O					٦,
			$\overline{}$		_ <u>X</u> _
	D	II res, rias it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		990	20161

Form 990 (2016) ELIJAH LIST MINISTRIES, INC. 16-1690199 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI	<u>.                                    </u>		LXI
Sec	ction A. Governing Body and Management			
	1 1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	4		
	If there are material differences in voting rights among members of the governing body, or if the governing	1	1	-
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.		ļ	
b	Enter the number of voting members included in line 1a, above, who are independent 1b	4		l
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		ł	l
	officer, director, trustee, or key employee?	2	X	<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	1	ļ	
	of officers, directors, or trustees, or key employees to a management company or other person?	3	<u> </u>	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u> </u>	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<u> </u>	X
6	Did the organization have members or stockholders?	6	<u> </u>	X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	ì	1	
	more members of the governing body?	7a	ļ	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	1	1	1
	persons other than the governing body?	7b	<u> </u>	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	1	}	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	<u></u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		}	}
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			1
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			i 
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		_X_
b	Other officers or key employees of the organization	15b		<u>X</u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1		
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	} }	1	
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		}	
	exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶OR			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	ıvaılabi	е	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
:	statements available to the public during the tax year.			
50	State the name, address, and telephone number of the person who possesses the organization's books and records: 🕨			
	STEVE SHULTZ - 541-967-3665			
	528 ELLSWORTH STREET SW. ALBANY OR 98321			

Form **990** (2016)

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Form 990 (2016) ELIJAH L	IST MIN	<u>IS</u>	TR	IE,	S,	I	NC	·	16-1690	199 Page 7
Part VII Compensation of Officers,				es,	Ke	уE	mp	oloyees, Highest C	ompensated	
Employees, and Independe										
Check if Schedule O contains a resp	<del></del>								<del></del>	
Section A. Officers, Directors, Trustees, Key										
1a Complete this table for all persons required t	-									
<ul> <li>List all of the organization's current officer</li> <li>Enter -0- in columns (D), (E), and (F) if no compen</li> <li>List all of the organization's current key en</li> <li>List the organization's five current highest cable compensation (Box 5 of Form W-2 and/or Better the compensation)</li> </ul>	sation was pai nployees, if any compensated e	d. y. Se mpl	ee in loyei	stru es (c	ctio	ns for	or d	efinition of "key employen officer, director, truste	- e." e, or key employee) wi	no received report
<ul> <li>List all of the organization's former officers reportable compensation from the organization a</li> <li>List all of the organization's former director more than \$10,000 of reportable compensation f</li> <li>List persons in the following order: individual trus</li> </ul>	ind any related ors or trustees rom the organi	org tha zatı	aniz at rec on a	ation cerve nd a	ns. ed, i iny i	n the	e ca	pacity as a former directorganizations.	tor or trustee of the or	ganization,
and former such persons.  Check this box if neither the organization in	or any related	ora	anıza	ation	ı co	mne	กรล	ted any current officer.	director, or trustee.	
(A)	(B)	<u> </u>	<u> </u>		<u>: 00</u> C)	mpo	110 <u>u</u>	(D)	(E)	(F)
Name and Title	Average hours per week	box offi	not c	Pos heck ss pe	itior more	than is bot or/trus	lh an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) STEVE SHULTZ	40.00									
PRESIDENT		X	<u> </u>	X	<u></u>	_	L	72,683.	0.	0.
(2) DERENE SHULTZ	1.00				ŀ					
SECRETARY/TREASURER		X	<b>├</b>	X		ـــ	<u> </u>	0.	0.	0.
(3) LORI SALLEY	1.00	X			Ì			0.	0.	0.
DIRECTOR PERPOR	0.00	Λ	╁	_	-	├	-	0.	0.	
(4) CHUCK PIERCE DIRECTOR	0.00	X				-		0.	0.	0.

Form 990 (2016)

ELIJAH LIST MINISTRIES, INC. 16-1690199 Page 9 Form 990 (2016) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under (B) Related or (C) Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue , Gifts, Grants nilar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 14 e Government grants (contributions) 1e f All other contributions, gifts, grants, and 349,062 similar amounts not included above g Noncash contributions included in lines 1a-1f \$\_ 349,062 h Total. Add lines 1a-1f **Business Code** 36,508. 2 a CONFERENCES 900099 36,508. Program Service Revenue f All other program service revenue 36,508. g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (a) Other assets other than inventory b Less: cost or other basis and sales expenses . . . c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ \_\_\_\_\_ of contributions reported on line 1c). See Part IV, line 18 ..... a c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 . .... . .. **b** Less: direct expenses . . . . .. b c Net income or (loss) from gaming activities . 10 a Gross sales of inventory, less returns and allowances ..... . ........ b Less: cost of goods sold .... b c Net income or (loss) from sales of inventory. Miscellaneous Revenue **Business Code** 177. 177. 11 a MISCELLANEOUS 900099 d All other revenue

0.

e Total. Add lines 11a-11d . ... ..

12 Total revenue. See instructions.

177.

36,508.

385,747.

Form 990 (2016) ELIJAH LIST MINISTRIES, INC. 16-1690199 Page 10
Part IX Statement of Functional Expenses

Do	Check if Schedule O contains a responsional include amounts reported on lines 6b,	(A)	(B)	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	4,100.	4,100.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign		Ì	1	
	individuals. See Part IV, lines 15 and 16		1		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	72,683.	18,171.	18,171.	36,34
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	j			
	persons described in section 4958(c)(3)(B)		1	1	
7	Other salaries and wages	46,114.		46,114.	
8	Pension plan accruals and contributions (include				
J	section 401(k) and 403(b) employer contributions)		į		
9	Other employee benefits	404.		404.	
10		10,631.	1,960.	5,415.	3,256
11	Fees for services (non-employees):	10,031.	1,900.	J, ±13.	3,230
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	į.			
a	Management	<del></del>		<del></del>	
b	Legal	3,775.		3,775.	
	Accounting	3,773.		3,773.	
	Lobbying		<del></del>		
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	<del></del>			
9	, ,	15 200	İ	15 200	
_	column (A) amount, list line 11g expenses on Sch O.)	15,200.		15,200.	176 500
12	Advertising and promotion	176,508.	<del>+</del>	2 (00	176,508
3	Office expenses	12,445.		3,698.	8,747
4	Information technology		<del></del>		<del></del>
5	Royalties	70.546	1 200	0.700	1 000
6	Occupancy	12,546.	1,882.	8,782.	1,882
	Travel	12,114.			12,114
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	<del> <u> </u></del>			
9	Conferences, conventions, and meetings	60,766.	60,766.		
	Interest				<del></del>
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	772.		772.	
3	Insurance				
	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	En			<del></del>
	LICENSE & PERMITS	50.	<del></del>	50.	<del></del>
b				<del></del>	<del></del>
C					<del></del>
ď					
	All other expenses				<del></del>
	Total functional expenses. Add lines 1 through 24e	428,108.	86,879.	102,381.	238,848
3	Joint costs. Complete this line only if the organization	}			
1	reported in column (B) joint costs from a combined	}		}	
	educational campaign and fundraising solicitation.				

P	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			🔲
			(A) Beginning of year	Enc	(B) d of year
	1	Cash - non-interest-bearing	63,338.	1	70,068.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	,	4	
	5	Loans and other receivables from current and former officers, directors,			
	}	trustees, key employees, and highest compensated employees. Complete		İ	
	}	Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
	}	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary		1	
2	l	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ÿ	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 30,840.		1	
	ь		3,276.	Oc.	3,324.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	<del></del>
	14	Indian - the land - th		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	73,392.
	17	Accounts payable and accrued expenses		17	67,721.
	18	Grants payable		18	<u> </u>
	19	Deferred revenue		9	10,879.
	20	Tax-exempt bond liabilities		10	<del>10/0/31</del>
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	<del></del>
,	22	Loans and other payables to current and former officers, directors, trustees,		· <del> </del>	
Liabilities		key employees, highest compensated employees, and disqualified persons.		ł	
<u>ឆ</u> ្គ				2	
ا ڌ	23	Secured mortgages and notes payable to unrelated third parties		3	
İ	24	Unsecured notes and loans payable to unrelated third parties		4	
- 1	25	Other liabilities (including federal income tax, payables to related third		<del>3  </del>	
ļ		parties, and other liabilities not included on lines 17-24). Complete Part X of		į	
		Schedule D	9	5	
- 1	26	Total liabilities. Add lines 17 through 25		6	78,600.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
ဖွ		complete lines 27 through 29, and lines 33 and 34.		}	
2	27	Unrestricted net assets	37,153. 2	7	<5,208.>
iver Assets of Fund balances		Temporanly restricted net assets		8	
9		Permanently restricted net assets		9	
5		Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
5		and complete lines 30 through 34.		}	
2		Control stock or to straight or invited by a support funds	3	0 }	
3		Paid-in or capital surplus, or land, building, or equipment fund	3		
١ \$		Retained earnings, endowment, accumulated income, or other funds	3		
2			37,153.3		< <b>5,208.</b> >
- 1		Total liabilities and net assets/fund balances	66,614.3		73,392.
	<u>~</u>	Total liquinities and fiet assets/fully parantes	00,0140 3	7.1	12,274.

	n 990 (2016) ELIJAH LIST MINISTRIES, INC.	<u> 16-169</u>	<u>0199</u>	<u> Page</u> 12
Pa	rt XI Reconciliation of Net Assets		_	
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,747.
2	Total expenses (must equal Part IX, column (A), line 25)	2	428	,108.
3	Revenue less expenses. Subtract line 2 from line 1	3	<42	<u>,361.</u> :
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	37	<u>,153.</u>
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	<5	,208.
Pa	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	<u> </u>	🗀
			Y	es No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.	1 1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	1 1	
	separate basis, consolidated basis, or both:		1 1	j
	Separate basis Consolidated basis Both consolidated and separate basis		1 1	
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,		
	consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			1
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit		}
	Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<del> </del>	3b	
			Form 99	90 (2016)

## SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**Total** 

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization **Employer identification number** 16-1690199 ELIJAH LIST MINISTRIES, Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. J Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E. that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed (v) Amount of monetary (i) Name of supported (ii) EIN (iii) Type of organization (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 E					16-169	0199 Page <b>2</b>
Part II Support Schedule for						
(Complete only if you checke				on failed to qualify	under Part III. If th	e organization
fails to qualify under the tests	s listed below, plea	ase complete Part	111.) 			
Section A. Public Support	<del>,</del>	<del></del>	<del> </del>	т		
Calendar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and			ļ			ļ
membership fees received (Do not			{		1	<b>,</b>
include any "unusual grants.")	<u> </u>	ļ		<b></b>	<del>                                     </del>	<del> </del>
2 Tax revenues levied for the organ-		1	<b>(</b>	}	}	<b>\$</b>
ization's benefit and either paid to		ł	}			
or expended on its behalf				<del>                                     </del>	<del> </del>	ļ
3 The value of services or facilities furnished by a governmental unit to		İ		)		
the organization without charge		]		1		
4 Total. Add lines 1 through 3					<del> </del>	
5 The portion of total contributions				<del>                                     </del>	<del> </del>	
by each person (other than a	! [			l		
governmental unit or publicly	i	ļ		l		
supported organization) included	ı			(		
on line 1 that exceeds 2% of the	l	į	,	5		
amount shown on line 11,	ı	}		į		
column (f)						
6 Public support. Subtract line 5 from line 4						
Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4						<u> </u>
8 Gross income from interest,	ļ			[		
dividends, payments received on		ĺ	'			
secunties loans, rents, royalties						1
and income from similar sources					<del></del>	
9 Net income from unrelated business					1	
activities, whether or not the					1	
business is regularly carned on					<del> </del>	<del> </del>
10 Other income. Do not include gain						
or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10					<del>  </del>	
12 Gross receipts from related activities,	etc (see instruction	ons)			12	<del></del>
13 First five years. If the Form 990 is for	•		 I. fourth, or fifth ta	· · · · · · · · · · · · · · · · · · ·		
organization, check this box and stop	•					
Section C. Computation of Public		rcentage				
4 Public support percentage for 2016 (lin	ne 6, column (f) di	vided by line 11, co	olumn (f))		14	%
Public support percentage from 2015	Schedule A, Part	II, line 14			15	%
6a 33 1/3% support test - 2016. If the or	ganization did no	t check the box on	line 13, and line 1	14 is 33 1/3% or r	nore, check this bo	x and
stop here. The organization qualifies a		-				▶
b 33 1/3% support test - 2015. If the or				line 15 is 33 1/39	6 or more, check th	s box
and stop here. The organization qualif	•					. ▶∟_
7a 10% -facts-and-circumstances test						
and if the organization meets the "fact			="		rt VI how the organ	zation
meets the "facts-and-circumstances" to						▶ ـــــا
b 10% -facts-and-circumstances test	<del>-</del>					U% OF
more, and if the organization meets the	; iacis-anu-circur	notanices test, cn	ock uns bux and s	stop nere. Expiali	THE PAIL VITION LITE	

Schedule A (Form 990 or 990-EZ) 2016

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

# Schedule A (Form 990 or 990-EZ) 2016 ELIJAH LIST MINISTRIES, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Se	qualify under the tests listed b	elow, please com	plete Part II )	<del></del>	<del> </del>		
_	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and	10/2012	(6) 2010	10/2014	10/2010	(6) 20.0	107.514
·	membership fees received. (Do not	1			}		
	include any "unusual grants.")	182 054.	184,243.	279 540	306 542	349 062	1301441
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	17,765.		23,680.			116,126
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	199,819.	204,662.	303,220.	324,119.	385,747.	1417567
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	_					0.
С	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6)						1417567.
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	199,819.	204,662.	303,220.	324,119.	385,747.	1417567.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		155.				155.
	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		155.				155.
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	199,819.	204,817.	303,220.	324,119.	385,747.	1417722.
14	First five years. If the Form 990 is for t	the organization's	first, second, third	, fourth, or fifth ta	x year as a section	501(c)(3) organiza	ation,
	check this box and stop here		<u></u>				▶□
Sec	tion C. Computation of Public	c Support Per	centage				
15	Public support percentage for 2016 (lir	ne 8, column (f) div	vided by line 13, co	olumn (f))		15	99.99 %
16	Public support percentage from 2015	Schedule A, Part I	II, line 15			16	99.99 %
Sec	tion D. Computation of Invest	tment Income	Percentage				
17	nvestment income percentage for 201	6 (line 10c, colum	n (f) divided by line	13, column (f))		17	.01 %
	nvestment income percentage from 20		· · · · · · · · · · · · · · · · · · ·		. [	18	.01 %
	33 1/3% support tests - 2016. If the o			n line 14, and line	15 is more than 33	3 1/3%, and line 17	
ı	more than 33 1/3%, check this box and 33 1/3% support tests - 2015. If the o	d stop here. The	organızation qualıfi	es as a publicly su	upported organiza	tion,	►X
	ine 18 is not more than 33 1/3%, chec	=					▶□
	Private foundation. If the organization		=	· ·		=	

## Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)\_\_\_\_

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No			
	1				
1	+	┼			
1					
2	J	ļ			
3a	<b></b> -	<del>↓</del>			
1	}	1			
3b					
3c	<u> </u>	<u> </u>			
4a	+	+			
4b	<u> </u>				
		Ì			
4c					
10	1	<del> </del>			
	}				
	}				
_5a	1	<del>                                     </del>			
5b	<u> </u>	<u> </u>			
_5c	ļ	<u> </u>			
	j	}			
_6_		<u> </u>			
7					
8					
00		İ			
9a					
9b					
9c					
10a					
	=				
10h					

Part IV   Supporting Organizations (continued)   Yes   No	Sch	edule A (Form 990 or 990-EZ) 2016 ELIJAH LIST MINISTRIES, INC. 1	6-169019	<u>9</u> P	age 5
11 Has the organization sccipted a gift or contribution from any of the following personn?  2 A Person who descitly or indexicity controls, either abine or together with persons described in (b) and (c) below, the governing body of a supported organization?  3 A Table of the property of the control of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the organization of the organization is always and the property of the organization of the property of the organization of the property of the organization of the property of the organization of the property of the organization of the property of the organization of the property of the organization of the property of the organization and more than the supported organization and what conditions or restrictions, if any appelled to supported organization and what conditions or restrictions, if any appelled to supported organization and what conditions or restrictions, if any appelled to supported organization and what conditions or restrictions, if any, appelled to supported organization and what conditions or restrictions, any, appelled to supported organization of the property of the organization of the purposes of the supported organization of the property of the organization of the purposes of the supported organization of the purposes of the supported organization of the organization of directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees of each of the organization organization of the supporting organization was vested in the same persons that controlled or managed for trustees of each of the organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organizati	Pa	art IV   Supporting Organizations (continued)		<u> </u>	т
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing pody of a supported organization?  b A family member of a person described in (a) above?  c A 23% controlled entity of a person described in (a) above?  d A 23% controlled entity of a person described in (a) or (b) above?  D I dit the direction, fusitese, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or fusitese at all times during the tax yea?  If No, 'describe in Part VI how the supported organization's directors or fusitese at all times during the tax yea?  If No, 'describe in Part VI how the supported organization's directors or fusitese at all times during the tax year?  If No, 'describe in Part VI how the supported organization's directors or trustese at all times during the tax year.  I bill the organization's activities. If the organization and more than one supported organization, describe how the powers to appoint and/or memore decisions or fusities were ellocated among the supported organizations or the supported organization other than the supported organization's directors or trustes and the supported organization other than the supported organization organization of the supported organization organizati				Yes	No
below, the governing body of a supported organization?  A family member of a person described in (a) above?  A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part V.  116  Section B. Type I Supporting Organizations  Did the directors, frustees, or membership of one or more supported organizations have the power to regulatly appoint or elect at least a majority of the organization is directors or trustees at all times during the tax year? If "No." describe in Part VI how the supported organization is directors or trustees at all times during the tax year? If "No." describe in Part VI how the supported organization is directors or trustees at all times during the tax year? If "No." describe in Part VI how the supported organization is directors or trustees at all times during the supported organization and the organization and the controlled organization or described organization, described organization and what conditions or restrictions of any supported organization of the supported organization and the supported organization or trustees were allocated among the supported organization of the the purposes of the supported organization of the the purposes of the supported organization of the the purposes of the supported organization of the organization of the organization of the purposes of the supported organization of the organization of the organization of the purposes of the supported organization of the organization of	11	Has the organization accepted a gift or contribution from any of the following persons?	}		
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the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  2a  b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  2b  Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.  3a  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each				163	140
those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  2a  b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  2b  2a  2a  2b  2b  2b  2b  2b  2c  2b  2c  2b  2c  2b  2c  2b  2c  2b  2c  2c	a		1	1	
how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  2b  Parent of Supported Organizations Answer (a) and (b) below.  a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			i i	- 1	
that these activities constituted substantially all of its activities.  b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  2b  Parent of Supported Organizations Answer (a) and (b) below.  a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			1 1	}	
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of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  2b  3 Parent of Supported Organizations Answer (a) and (b) below.  a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			<del></del>		
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activities but for the organization's involvement.  2b  Parent of Supported Organizations Answer (a) and (b) below.  a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			}	-	
Parent of Supported Organizations Answer (a) and (b) below.  a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			26	- 1	
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		·	20		
trustees of each of the supported organizations? Provide details in Part VI.  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			1	1	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			32	}	
		··· ·			
			3b		

	irt V   Type III Non-Functionally Integrated 509(a)(3) Supporti			16-1690199 Page
1	Check here if the organization satisfied the Integral Part Test as a qualify			Part VI.) See instructions.
•	other Type III non-functionally integrated supporting organizations must o	-		
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
_2	Recoveries of prior-year distributions	2		
_3_	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or	1		
	maintenance of property held for production of income (see instructions)	6		
7		7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	T		
	instructions for short tax year or assets held for part of year):	Í		
а	Average monthly value of secunties	1a		
	Average monthly cash balances	1b	<u> </u>	
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	1-1		
•	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recovenes of prior-year distributions	7	<del></del>	<del> </del>
8	Minimum Asset Amount (add line 7 to line 6)	8		
	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to	11		
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functiona		d Type III supporting orga	nization (see
-	instructions).	, 35		- <b>V</b>

Schedule A (Form 990 or 990-EZ) 2016

	edule A (Form 990 or 990 EZ) 2016 ELIJAH LIST N			16-1690199 Page 7
P	art V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations (continued)	
Sec	tion D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity			
_3_	Administrative expenses paid to accomplish exempt purpos	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets	<del></del>		
_5	Qualified set-aside amounts (prior IRS approval required)			
_6	Other distributions (describe in Part VI). See instructions	<del></del>		
7	Total annual distributions. Add lines 1 through 6			<u> </u>
8	Distributions to attentive supported organizations to which t	he organization is responsiv	е	1
	(provide details in Part VI). See instructions			<u> </u>
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
С	From 2013			
d	From 2014			
	From 2015			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D.			
	line 7: \$		п	
а	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
_	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in	Ì		1
	Part VI. See instructions			
7	Excess distributions carryover to 2017, Add lines 3j			
•	and 4c			
8	Breakdown of line 7:	···		†
a	erounderin or mile 1.			<del>                                     </del>
	Excess from 2013			†
	Excess from 2014			<del> </del>
	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2016

e Excess from 2016

Schedule A	(Form 990 or 990-EZ) 2016 E	LIJAH LIST	MINISTRIES.	INC.	16-1690199 Page 8
Part VI	Supplemental Information Part IV, Section A, lines 1, 2, 3	<b>tion.</b> Provide the e	explanations required by , 9a, 9b, 9c, 11a, 11b, an	Part II, line 10; Part II, line 17a o d 11c; Part IV, Section B, lines	or 17b; Part III, line 12; 1 and 2; Part IV, Section C,
•	line 1; Part IV, Section D, lines Section D, lines 5, 6, and 8, a (See instructions.)	s 2 and 3; Part IV, Send Part V, Section E	ection E, lines 1c, 2a, 2b, , lines 2, 5, and 6. Also c	3a, and 3b; Part V, line 1; Part omplete this part for any addition	V, Section B, line 1e, Part V, onal information
		_			
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### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.lrs.gov/form990.

2016
Open to Public Inspection

Schedule D (Form 990) 2016

**Employer identification number** Name of the organization ELIJAH LIST MINISTRIES, INC. 16-1690199 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds Total number at end of year . . . . . . 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year ....... 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements ..... 2a Total acreage restricted by conservation easements 2b . . . . . Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

		LIST MINIS	TRIES, IN	C		16-:	<u> 1690199</u>	Page 2
Pa	rt III   Organizations Maintaining C	collections of A	rt, Historical T	reasures,	or Other	Similar As	sets(contin	ued)
3								
•	(check all that apply):							
а	Public exhibition	d	Loan or ex	change progi	rams			
b	Scholarly research	e	Other					<del>-</del>
C	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further	the organizat	ion's exem	pt purpose in f	Part XIII	
5	Dunng the year, did the organization solicit or							
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's o	collection?			Yes	☐ No
Pa	rt IV Escrow and Custodial Arrang	gements. Comple	te if the organizati	ion answered	"Yes" on F	orm 990, Part	IV, line 9, or	
	reported an amount on Form 990, Par		_					
1a	Is the organization an agent, trustee, custodia	an or other intermed	ary for contribution	ons or other a	ssets not in	cluded		
	F 000 D-+V0						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a			• • • • • • •				
	. , . ,		<b>g</b>				Amount	
c	Beginning balance					1c		
d	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance			· · · · · · ·		1f		
2a	Did the organization include an amount on Fo				ount liability		Yes	□ No
	If "Yes," explain the arrangement in Part XIII.				_			$\overline{\Box}$
	t V Endowment Funds. Complete if					<del> </del>	<u> </u>	
·		(a) Current year	(b) Pnor year			Three years ba	ck (e) Four v	ears back
1a	Beginning of year balance	(a) surroun jour	107 / 1101 / 1011	107.110 700	Sagar. (Ca	700 / 34 5 54	<u> </u>	
b	Contributions	<del></del>		<del> </del>				
c	Net investment earnings, gains, and losses			<del> </del>		·		
4	Grants or scholarships			1			<del></del>	
u	Other expenditures for facilities			<del> </del>			+	
·	and programs			1	1			
	Administrative expenses			<del> </del>			<del>                                     </del>	
'	Tad at			<del> </del>			+	
y	Provide the estimated percentage of the curre	ent year and belongs	/lina da columa /	'all bald as:				
2	Board designated or quasi-endowment	•	ov	a)) rielu as.				
a	Permanent endowment	%	_70					
		% %						
C	The percentages on lines 2s. 2h. and 2s show	<del></del>						
0-	The percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentage of th	·			ward faw than			
3a	Are there endowment funds not in the posses	ision of the organiza	tion that are neig a	ano aoministe	rea for the	organization	ſ.	/aa   Na
	by:							es No
	(i) unrelated organizations						3a(i)	<del></del>
	(ii) related organizations If "Yes" on line 3a(ii), are the related organizations					•••	. 3a(ii)	
		•					3b	
Par	Describe in Part XIII the intended uses of the of tVI Land, Buildings, and Equipment		vnient runas.					
r ai			Dort IV Ima 11a (	Caa Earm 000	Dort V. Ivo.	. 10		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other  (b) Cost or other  (c) Accumulated  (d) Book value							
	Description of property	(a) Cost or oth	, , ,				(a) BOOK \	/alue
	basis (investment) basis (other) depreciation							
	Land	<del> </del>						
	Buildings	·		0 000		0 000		
	Leasehold improvements	<del> </del>	<del></del>	9,890.		9,890.		0.
	Equipment	<del></del>		0,950.	1	7,626.	3	,324.
	Other	. 1	( ) ) ) )	100)				324

Part VII Investments - Other Securities.	MINISTRIE	is, inc.		0-1690199 Page
Complete if the organization answered "Yes" o	n Form 990. Part I	V. line 11b. See Form 990	). Part X. line 12.	
(a) Description of security or category (including name of security)	(b) Book value			d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
_(C)				
(D)		<del></del>		
<u>(E)</u>	<del></del>		<del></del>	
<u>(F)</u>	<del></del>	<del></del>	<del></del>	
(G)	<del></del>			
(H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<del></del>	<del></del>		
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" or	Form 990 Part IV	/ line 11c See Form 990	Part Y line 13	
(a) Description of investment	(b) Book value			d-of-year market value
(1)	<del></del>	<del></del>		<del></del>
(2)	<del></del>		<del></del>	
(3)	<del></del>			
(4)				
(5)				
(6)				
(7)				
(8)				<del> </del>
(9)				<del> </del>
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes" on	i Form 990, Part IV escription	, line 11d. See Form 990	Part X, line 15.	(b) Book value
<del></del>	scription			(b) BOOK VAIDE
(1)			<del></del>	
(2)				<del></del>
(3)			<del></del>	<del></del>
(5)				
(6)				<del></del>
(7)	<del></del>	<del></del>		
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 1	5.)			
Part X Other Liabilities.				
Complete if the organization answered "Yes" on	Form 990, Part IV		n 990, Part X, line 25	·
(a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)		<del></del>		
(5)				
(6)		<del></del>		
(7)		<del></del>		
(8)		<del></del>		
(9) otal. (Column (b) must equal Form 990, Part X, col. (B) line 2	51	<del></del>		
Liability for uncertain tax positions. In Part XIII, provide the		ote to the organization's f	inancial statements #	hat renorts the
organization's liability for uncertain tax positions under FII		_		
tart poortions and an and a line of the start poortions and a line of the				

Schedule D (Form 990) 2016

Sche	dule D (Form 990) 2016 ELIJAH LIST MINISTRIES, INC.	16-1690199 Page
Pa	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains (losses) on investments	
b	Donated services and use of facilities	7
c	Recoveries of pnor year grants 2c	7
ď	Other (Describe in Part XIII.)	7
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
-, a	Investment expenses not included on Form 990, Part VIII, line 7b	1 1
b	Other (December of Book VIII.)	† 1
	Add long to and the	1 . 1
E C	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	4c   5
5 Dar	t XII   Reconciliation of Expenses per Audited Financial Statements With Expenses per	
r ai	<del></del>	neturii.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	<del>, , , , , , , , , , , , , , , , , , , </del>
1	Total expenses and losses per audited financial statements	<del>-1</del>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	4 4
а	Donated services and use of facilities	4 1
b	Pnor year adjustments	<u> </u>
C	Other losses	4
d	Other (Describe in Part XIII.)	<u> </u>
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	1 1
	Other (Describe in Part XIII.) 4b	1
	Add lines 4a and 4b	4c
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5
Par	XIII Supplemental Information.	<del> </del>
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4 d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	4; Part X, line 2; Part XI,
	<del></del>	

## **SCHEDULE 0**

(Form 990 or 990-EZ)

1 N 14

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Open to Public Inspection

ELIJAH LIST MINISTRIES, INC.	16-1690199
FORM 990, PART VI, SECTION A, LINE 2:	
THE PRESIDENT IS MARRIED TO THE SECRETARY/TREASURER.	· · · · · · · · · · · · · · · · · · ·
FORM 990, PART VI, SECTION B, LINE 11B:	
THE ANNUAL TAX RETURN IS REVIEWED AT A BOARD MEETING BEF	FORE IT IS FILED.
THEY GO THROUGH THE RETURN BY PAGE AND DISCUSS ANY QUEST	CIONS OR ISSUES THEY
MAY HAVE WITH THE RETURN.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE MINISTRY PROVIDES COPIES OF ALL INFORMATION UPON REQ	UEST AND ALSO HAS
COPIES ON HAND FOR ANYONE WHO WISHES TO REVIEW THEM IN P	PERSON.
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